TO: Allies for Health Board of Trustees  
DATE: December 31, 2012  
RE: Action plan for health improvement beginning in the Church Hill and Highland Park areas of Richmond, Virginia

I. Introduction

Although the medical advances have increased life expectancy, provided preventive care and treatment, and improved living standards, the poor has limited access to health care. As Americans get health care through employer-paid, individual or government-sponsored insurance such as Medicaid and Medicare, the low-income earners tend to be uninsured. According to U.S. Census Bureau report, 25.4% of households whose income is less than $25,000 had no health insurance coverage (DeNavas-Walt C et al. 2012, p. 25). Despite the government’s efforts to provide health care to the poor, explained in the chart below, the data (Table 1) show that almost a third of all nonelderly people whose income is below 200 percent of the poverty level were uninsured (Swartz 2009, p. 70).

<table>
<thead>
<tr>
<th>Year</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1900–1935</td>
<td>Medical care assistance provided ad hoc by civic and religious groups, primarily to “deserving poor”</td>
</tr>
<tr>
<td>1935–1945</td>
<td>Social Security Act passed, rise of public hospitals and clinics for poor, beginning of two-tiered system of medical care</td>
</tr>
<tr>
<td>1945–1965</td>
<td>Private insurance coverage expands, setting the stage for Medicaid</td>
</tr>
<tr>
<td>1965</td>
<td>Medicare and Medicaid implemented</td>
</tr>
<tr>
<td>1984–1990</td>
<td>Expansion of Medicaid</td>
</tr>
<tr>
<td>1990s</td>
<td>Efforts to slow Medicaid spending growth, waivers, and welfare reform</td>
</tr>
<tr>
<td>1997</td>
<td>Creation of the State Children’s Health Insurance Program (SCHIP)</td>
</tr>
<tr>
<td>Early 2000s</td>
<td>Efforts to control Medicaid spending growth and state experiments to expand options for poor people</td>
</tr>
</tbody>
</table>

This table suggests that the government cannot ensure all the poor have health care. In this sense, it is very important for non-governmental organization to intervene and improve the health conditions of the poor. Allied for Health therefore is established to work in the poor communities to take care of the residents’ health and pay attention to the details that the government might neglect.

Allied for Health plans to provide patient care and improve
health conditions of the poor populations in the Church Hill and Highland Park areas of Richmond, Virginia. Paul Farmer, the co-founder of “Partners in Health”, said that there is a “duty to provide ‘a preferential option for the poor’” (Kidder 2004, p. 62). This is due to a cycle of poor health and poverty. “People with chronic medical conditions frequently are poor because they cannot work, and people who suffer a sudden decline in health often become poor after losing their job (Swartz 2009, p. 69).” By giving the poor a preferential health care, it ensures individuals “have equal opportunities to pursue a life of their choosing and be spared from extreme deprivation in outcomes” (World Development Report 2006: Equity and Development 2005, p. 2). In addition to that, from economic perspective, provision of health care to the poor means healthier labor in the society and this also makes them fully and efficiently develop human potential. Moreover, this will also reduce poverty level in the society, as they have good health to work and thus break their social status.

Furthermore, Allied for Health pays special attention to the health care of the children living in these communities. In Heckman’s journal (2008), he states that “ability gaps between the advantaged and disadvantaged open up early in the lives of children (p. 2)” and calls for the early intervention to solve the problem of rising inequality. As we have learned that poor health affects learning, a very important means to develop human capital, Allied for Health will provide early intervention in order to reduce inequality in health care and thus education.

II. Background
Allied for Health will be headquartered in the Church Hill and Highland Park areas of Richmond, Virginia. According to County Health Ranking, City of Richmond was placed in the 125th healthiest county out of 131 counties in Virginia. 18% of Richmond residents are uninsured, a 7% lower than national benchmark and a 4% lower than Virginia State. Moreover, adult smoking rate in Richmond scored 21%, compared to 14% of national benchmark (“Richmond City” 2012).

In addition to that, Virginia Department of Health identifies Richmond City as an area or population “as having a shortage of dental, mental, and primary health care providers (“Shortage Designations”).” According to “Final Report: Analysis of Virginia’s Health Workforce Pipelines” (2012), Figure 8, 9 and 12 indicate that Richmond City needs more primary care physicians, mental health providers, and dental providers.
Health professionals are especially in shortage in Church Hill and Highland Park areas in Richmond, Virginia. In Church Hill, an area with the population of 43,630, there are only 7 dentists, 3 health clinics, and 2 hospitals. Moreover, in Highland Park, an area with the population of 27,438, there are only 5 dentists and 1 health clinic.

In addition to this shortage, these two areas are especially poor compared to Virginia state, as mentioned earlier. In 2010, 26.4% of residents in Church Hill live below the poverty level, compared to 10.7% in Virginia (“City-Data 23223”). Moreover, 22.4% of residents in Highland Park also live below the poverty level in 2010 (“City-Data 23222”).

Due to this serious poverty rate in both Church Hill and Highland Park areas, these residents spend on health care below the national average (“Homes Point 2 Church Hill” and “Homes Point 2 Highland Park”). Because of this poverty and residents’ low spending on health care, Allied for Health believes that it is very essential for it to provide low-cost yet effective health care to the population. In this sense, Allied for Health is an advocate of Buddhist Economics, which believes “more is not better.”
The focus of Buddhist economists is to maximize satisfaction with lowest possible consumption (Schumacher 1973, p. 61). We believe this can also be applied in medical organization. For instance, McAllen, Texas spent $15,000 per enrollee in 2006, almost twice the national average. Yet, it did not necessarily provide better health care than El Peso whose medical spending were $7,504 per enrollee. McAllen’s costly medical expenditure is caused by overuse of medical care which is proved to be inefficient in providing proper care to the public (Gawande 2009). Allied for Health therefore will not allow overuse of medical care or malpractice to take place which leads to outlandish costs to the population in Church Hill and Highland Park areas of Richmond.

Besides health professional shortage and poverty, low education rate is also a barrier to health care. Many poor people neither understand symptoms of medical need nor know how to describe and explain their symptoms to nurses or doctors (Swartz 2009, p. 69). In both Church Hill and Highland Park, most residents have education less than high school (“City-Data 23222” and “City-Data 23223”).

Moreover, as shown above in two figures, Church Hill (zip code 23223) and Highland Park (zip code 23222) have high rates of intentional injury deaths of youth as well as high rates of intentional injury visits of youth to the VCU Emergency Department (Bishop and Masho 2009, pp. 13 & 26). This high level of violence is associated with their stress level, environment, and mental health (Friedman & Cooley 2009).
In addition to these problems, in 2003 Virginia Department of Health designated Church Hill (zip code 23223) and Highland Park (zip code 23222) as “high-risk zip codes” of lead-poisoning (“Virginia High-Risk” 2003). This is due to the housing built before 1950 and/or “an increased prevalence of children with elevated blood levels per available data (“Virginia High-Risk” 2003). In fact, both Church Hill and Highland Park have most of its buildings built earlier than 1959 or 1959 (“23222 Zip Code Housing” and “23223 Zip Code Housing”).

Due to these old buildings, it is common to see lead paint like the picture on the right. Lead poisoning is particularly dangerous to children, as it affects their development of their nervous system. “Children with greater lead levels may also have problems with learning and reading, delayed growth and hearing loss. At high levels, lead can cause permanent brain damage and even death (“Lead Exposure in Children” 2012).”

Additionally, according to a Gallup survey, Richmond ranked the second most obese city in the United States (“Richmond Ranks 2nd” 2012). In Church Hill and Highland Park, it is difficult to find fruit or vegetable market. Still, there are lots of fast food restaurants such as Burger King, McDonald’s, and Popeyes (“City-Data 23222” and “City-Data 23223”).

In sum, health issues in Church Hill and Highland Park areas of Richmond, Virginia include: shortage of primary care physicians, mental health providers, and dental providers, mental health, lead poisoning, obesity, and smoking. Allied for Health will therefore target these severe problems as well as other common health issues to improve health of the population in these two areas with the lowest cost of health care.
III. Solutions

1. Primary Care Physicians

Allied for Health recognizes the importance of primary care physicians. According to R. Onie et al. (2012), primary care doctors are the key to improving value-based care. This is because they focus on “preventive services, care coordination, and disease management” and “reduce unnecessary health care costs (p.30).” Additionally, one of five fundamental principles of Partners in Health is to provide access to primary health care to the communities. This is because “people seek care because they feel sick, not because they have a particular disease. When quality primary health care is accessible, the community develops new faith in the health system (PIH Model of Care).” As patients gradually realize that Allied for Health does not overcharge patients, they will become more willing to visit when they feel sick. In this case, primary care physicians will be able to provide preventive care. Additionally, patients themselves could also save their spending on emergency room care to other normal patient care. Allied for Health therefore will hire more primary care physicians to eliminate shortage and at the same time expand primary health care to the patients to lower the cost and provide preventive care.

2. Mental Care

Allied for Health acknowledges that mental health is one of many important factors that leads to violence especially in youth. As Richmond city shows a significant shortage in mental care providers, Allied for Health will hire psychiatrists as well as child and adolescent psychiatrists. Moreover, child and adolescent psychiatrists will visit elementary, middle, and high schools in both Church Hill and Highland Park areas in order to provide counseling service and diagnose their mental health. This program will be called as “after-school counseling.” Students will voluntarily stay after school and talk with Allied for Health psychiatrists. They can talk about their academic concerns, school violence, prank, family concerns, and any other topics that create concerns and stress for them. This is a bi-weekly service and is also free for these children. We believe that mental health is essential in early intervention of inequality and also necessary for development and learning. Charging the service will rather become counterproductive and these children and teenagers will not find a place to talk about their concerns freely and get assistance from psychiatrists. As students might be afraid of how others view them when they get counseling from psychiatrists, Allied for Health psychiatrists will provide “after-school counseling” to all students for twice. In so doing, it will eliminate wrong conception that people who get counseling from psychiatrists are crazy and weird. In this case, students will be more willing and likely to use “after-school counseling” service to distress themselves.

3. Dental Care

Allied for Health understands that dental services are more difficult to subsidize in the poor communities. Gladwell in his article “the Moral-Hazard Myth” explores the importance relationship between uninsured population and dental care. People without health insurance have bad teeth. This is because going to the dentist for regular checkups is unaffordable for the uninsured. Also, as many of the uninsured people drink alcohol as a salve to reduce their pain of tooth decay, they “waste” money in exchange of short-term pain relief. These people would also find it difficult to get a position as a receptionist, as their smile or teeth might make others uncomfortable. Additionally, given the fact that most of the uninsured people are the poor, they
would hardly be able to eat healthy food that might help them to prevent bad teeth. For instance, in poor communities, junk food and soda are cheaper and more available than other healthy food. Also, these types of food are more addictive, as they contain high level of salt and sugar. As a result, the poor would choose unhealthy food over healthy food, which would exacerbate their dental care (Galdwell 2005).

According to “Final Report: Analysis of Virginia’s Health Workforce Pipelines” (2012), average cost of patient visit to see a dentist is $224, a little more than twice the average cost of seeing a primary care physician ($101). Moreover, a patient is responsible 49% of the medical cost (“Final Report” 2012). In this environment, Allied for Health believes that it is essential to provide low-cost or free dental services to the residents in Church Hill and Highland Park areas. The organizations that provide free or low-cost dental care in Virginia include Mission of Mercy (MOM), Federally Qualified Health Centers, Remote Area Medical (RAM), Virginia Community Health Centers, Virginia Departments of Health, Virginia Free Health Clinics, and VCU Clinics. Allied for Health will cooperate with these organizations and share their goal to provide great quality yet low-cost dental care to the patients. Still, just like Remote Area Medical (RAM) holds a free medical checkup mainly for the poor, the uninsured, or the underinsured population each year, Allied for Health will also provide such a service annually.

4. Lead-free Project
Allied for Health shares the same belief with Health Leads on that health care is not merely limited to vaccines or medicine. What it focuses on, in other words, is preventive care rather than traditional health care that we have been receiving. The organization, therefore, prescribes nutritious food, health in the winter, and other basic resources for their patients the same way they prescribe medication (Onie TED 2012). Allied for Health physicians therefore will ask unusual questions such as “do you have safe housing?” and “when was your house built?” (R. Onie et al. 2012, p. 33). If patients live in housing full of lead and suffer from lead-poisoning, Allied for Health will contact with housing company to arrange repainting or rebuilding appointments. As Helen Epstein stated in the article Ghetto Miasma: Enough to Make You Sick (2003), Allied for Health believes that environment makes a huge difference in health care and will assist patients suffering from lead-poisoning in any ways possible to improve their health.

5. College Volunteers
Rebecca Onie, in her TED talk, encourages and supports college students to volunteer in the health care reform movement to make an impact in the efficiency of U.S. health care system. Onie said that “too long we have asked too little of our college students when it comes to real impact n vulnerable communities (Onie TED 2012).” College students are well-equipped with their knowledge on academic field but their mentality and characters are not well-developed. Through their volunteer experience, they will learn how to be more considerate and live a life as a member of community. Additionally, as this is not an experience that one could learn in medical school, it will particularly give pre-med students how to build up patient-doctor relationships and how to provide patient care. Allied for Health therefore will encourage college students to volunteer at its center to contribute their passion and utilize their capital and at the same time learn a very valuable and unforgettable experience.

6. Community Health Workers
According to Suzy Hansen (2012) in the article *What Can Mississippi Learn from Iran*, Iran was able to reduce health disparities between rural and urban Iranians by building “health houses” that is located at walking distance. Community health workers “advise on nutrition and family planning, take blood pressure, keep track of who needs prenatal care, provide immunization and monitor environmental conditions like water quality” (Hansen 2012). These community health workers gain trust as they are from the villages they serve. Additionally, the referral system allows community health workers to take care of the sick and pass the very sick to specialists or primary care doctors. Community health workers will provide constant attention and care to patients, which is also a very important element in healing process. Allied for Health therefore understands the importance of community health workers and will hire a couple of them so that they can perform unplanned home visits and calls, as mentioned in the *Hot Spotters* (Gawande 2011), as well as other tasks that community health workers in health houses in Iran do.

7. Cluster and Health
Allied for Health recognizes the role of social network plays in health. In TED talk, Nicholas Christakis (2010) introduces widowhood effect to explain obesity epidemic. Obesity of one’s friend increases one’s obesity due to clustering and to spread of idea on the acceptable size. In addition to that, a research also indicates that “smoking behavior spreads through close and distant social ties, groups of interconnected people stop smoking in concert, and smokers are increasingly marginalized socially (Christakis, Nicholas and Fowler, James 2008).” Due to this reason, Allied for Health believes that patients could quit smoking and combating obesity through clustering. Each week, patients will meet up and discuss what their challenges to achieve their goal are. They will then evaluate success and failures during their week and set a new goal for next week before leaving. This therefore will motive patients to a greater extent to improve their health. Additionally, by identifying a positive deviance in the cluster, patients will learn his or her secret of what are necessary measures to take in order to improve their health. In this environment, they will follow and copy a positive deviance and therefore make the positive deviance’s model as theirs.

Moreover, in order to set up the better framework for this cluster, Allied for Health will send one or two community health workers to this regular meeting. Esperanza will send one or two bank officers to bank meetings to remind bank associates of their goal, plan, and rules. They also educate them how to eat healthy and stay healthy. Allied for Health community health workers therefore will take the similar responsibility. They will guide patients to achieve better health and educate them right ways to protect their health. At the same time, they will act as friends to listen to their concerns and build up personal relationships with these patients to show their care and love.

In regard to combating obesity through cluster, Allied for Health will also set up community taichi class. Patients can meet in the park every morning to practice taichi. We believe this will not only improve health but also boost friendship among patients, which is essentially beneficial to motivating each other to lose weight to become healthy.
8. Eye Care in Schools
More and more children wear glasses due to rising usage of technological devices including television, cell phone, and laptop. Allied for Health therefore recommends each school to adopt eye exercise (the one that students perform in Chinese schools) to make their eyes relaxed.

9. Education in Schools
In addition to eye exercises, Allied for Health also supports schools to educate children of health. This should be a 20 minutes class every week. Allied for Health workers will use first 10 minutes to introduce various topics such as the importance of vaccines and the infectious diseases, then they will allow students to discuss and share their experience to enhance their understanding on health. In addition to this, Allied for Health will distribute “symptoms books” to all students so that they and their families can read it. The books tell you different symptoms for different diseases or illness that allow families to self-diagnose at home. Self-diagnose page will look like the following:

Through these questions, one can self-diagnose why they feel sick and take correspondent behaviors.

10. Technology
Allied for Health aims to utilize technology to improve its patient care. One of services that it will provide is to communicate with patients via skype. This implements the idea of Sherpaa which aims to reduce time and money spent at hospitals and. For instance, a patient feels sick and self-diagnoses that he or she has a flu. By skyping with doctors, the patient will learn if he or she need to visit the health center for further examination or should he or she just need some rest at home. Allied for Health therefore provides skype-friendly health care to patients to reduce cost and save time.
IV. Measurement of Effectiveness and Progress

Allied for Health believes that it is very essential to monitor its effectiveness and progress in order to provide better health care to patients. The first way to measure its effectiveness is through survey. Allied for Health will provide questionnaire in hard copies, text messages, or emails. Questionnaire include questions such as “how long did you talk with the doctor?”, “on the scale of 1-5, rate the quality of visit”, and “would you likely to recommend Allied for Health to others?” Through these questions, Allied for Health will understand to what extent patients are satisfied with services it provides and will learn which areas it needs to change and improve.

Moreover, Allied for Health will hold employees meeting bi-weekly. Employees will share their thoughts on their experience of working at Allied for Health. Additionally, they will also share with others on what they are working on or what they have done. Allied for Health believes this meeting will assess the organization’s effectiveness and progress. It also enhances their working experience and increases their satisfaction rate of being in Allied for Health. Moreover, it also creates bonds among employees so that they can encourage and motivate one another to handle challenges and difficulties.

In employees meeting, doctors and nurses will get to share their failure and how they attempt to rescue them. According to Atul Gawande, “the only failure is the failure to rescue something (Gawande 2012).” People all face complications and uncertainties regardless of how well they perform on certain tasks. Still, what makes different from people to people is that if they are ready to admit and accept the imperfectness in their efforts and are willing to take the challenge to succeed to rescue failures. Therefore, by making doctors and nurses share their stories of failure, they will learn what other approaches they could have taken to rescue the failures. In addition to that, others will learn not to make the same mistakes or at least know how to rescue the failures by following the examples.

Moreover, Allied for Health will come up with a manual guideline by gather information from positive deviances. In Big Med (2012), Atul Gawande describes how John Wright gathers a group of people from every specialty involved to formulate a single default way of doing knee replacement surgeries. Allied for Health will follow John Wright and set up formulas for each treatment to maximize effectiveness at lowest possible cost. Still, it will change one variable each time to see what other areas these formulas could be improved.

V. Conclusion

As Vilfredo Pareto once said, “Give me an error any time, full of seeds, bursting with its own corrections. You can keep your sterile truth for yourself,” Allied for Health is not afraid of any mistakes. It is a newly established organization with greatest ambitions – to provide effective health care at low cost to the poor population living in Church Hill and Highland Park areas of Richmond, Virginia. Allied for Health might face lots of challenges, but it is confident that it can overcome all of those and gradually improve its health care programs. Additionally, it will also pay attention to monitoring its effectiveness and progress so as to upgrade the existing programs.
Works Cited

“Homes Point 2 Church Hill.” Homes Point 2. Accessed December 2, 2012,


I pledge my honor that I have neither received nor given unauthorized assistance during the completion of this work.

Solee Park